



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/799,842-Conf. #8505
	Filing Date	March 13, 2004
	First Named Inventor	Gale White
	Art Unit	3763
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	Attorney Docket Number	17127/002004

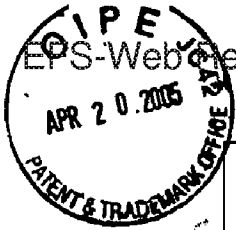
ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copies of foreign references Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	OSHA · LIANG LLP		
Signature			
Printed name	John W. Montgomery		
Date	April 20, 2005	Reg. No.	31,124

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Dated: April 20, 2005

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10799842 - GAU: 3763

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Dated: April 20, 2005

Signature

*Colby S. Delgado*  
(Colby S. Delgado)

Docket No.: 17127/002004  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Gale White et al.

Application No.: 10/799,842

Confirmation No.: 8505

Filed: March 13, 2004

Art Unit: 3763

For: **PATIENT MEDICATION IV DELIVERY  
PUMP WITH WIRELESS  
COMMUNICATION TO A HOSPITAL  
INFORMATION MANAGEMENT SYSTEM**

Examiner: Not Yet Assigned

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (IDS)**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 CFR 1.97, Applicant(s) hereby make of record the following additional documents. A PTO Form SB/08 and a full copy of each of the documents required under 37 CFR 1.98(a)(2) accompany this statement.

Applicant(s) have become aware of the following documents, cited in an International Search Report issued March 16, 2005, during the prosecution of international application no. 00992182.6, which corresponds to the above referenced application, and in accordance with 37 CFR 1.97(c) and (e)(1) or (b)(3), hereby submit(s) these documents for the Examiner's consideration. These documents are cited on the enclosed PTO Form SB/08, and a copy of the International Search Report and of each document required under 37 CFR 1.98(a)(2) cited thereon are enclosed as well.

Application No.: 10/799,842

Docket No.: 17127/002004

This statement is not to be interpreted as a representation that the cited documents are material, that an exhaustive search has been conducted, or that no other relevant information exists. Nor shall the citation of any document herein be construed *per se* as a representation that such document is prior art. Moreover, Applicant(s) understand(s) the Examiner will make an independent evaluation of the cited documents.

The undersigned hereby certifies that each item contained in this Supplemental Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Information Disclosure Statement. Furthermore, in accordance with 37 CFR 1.704(d), Applicant(s) note(s) that to our knowledge this communication was not received by any individual designated in 1.56(c) more than thirty days prior to the filing of this statement.

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0591, under Order No. 17127/002004. A duplicate copy of this paper is enclosed.

Application No.: 10/799,842

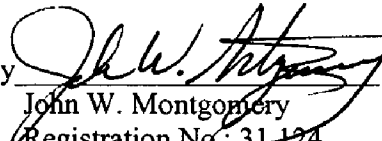
Docket No.: 17127/002004

Applicant believes no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 50-0591, under Order No. 17127/002004 from which the undersigned is authorized to draw.

Dated: April 20, 2005

Respectfully submitted,

By



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(713) 228-8600  
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Application No. (if known): 10/799,842

Attorney Docket No.: 17127/002004

**Certificate of Express Mailing Under 37 CFR 1.10**

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on April 20, 2005  
Date

A handwritten signature in cursive script that reads "Colby S. Delgado".

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Colby S. Delgado

\_\_\_\_\_  
Typed or printed name of person signing Certificate

\_\_\_\_\_  
Registration Number, if applicable

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IDS (Citation) by Applicant (2 References) (1 page)  
Supplemental Information Disclosure Statement  
Transmittal



PTO/SB/08a/b (08-03)

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Substitute for form 1449A/B/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				<b>Complete if Known</b>	
				Application Number	10/799,842-Conf. #8505
				Filing Date	March 13, 2004
				First Named Inventor	Gale White
				Art Unit	3763
				Examiner Name	Not Yet Assigned
Sheet	1	of	1	Attorney Docket Number	17127/002004

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number-Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
	BA	WO-99/10029-A1	03-04-1999	DEKA Products Limited Partnership	Page 10, line 4 - page 12, line 32; page 17, lines 20- 30; page 18, lines 11-30; page 20, line 34 - page 27, line 5, figure 6	
	BB	WO-93/12828-A1	07-08-1993	Abbot Laboratories	Page 8, lines 5-7	

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

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<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature	/Manuel Mendez/	Date Considered	07/17/2008
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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /M.M./